

APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES
OFFICE OF ADMINISTRATIVE SERVICES
RECORDS MANAGEMENT UNIT

For instructions on completing this form contact DHR Records Management Unit, 47 Trinity Avenue, Atlanta, Georgia 30334. Phone - (404) 656-4976 GIST: 221-4983

DHR		1. GEORGIA DEPARTMENT OF HUMAN RESOURCES		ARCHIVES AND HISTORY	
Application Date July 8, 1982		Div. of Mental Health & Mental Retardation - Alcoholism & Drug Abuse Services Section - Toxicology Laboratory Room 514-S GMHI 1256 Briarcliff Road, N.E. Atlanta, Ga.		Application Number 82-224	
Application Number DHR 82-24				Date Received JUL 14 1982	
2. Person to Contact		Working Title / 30306		Telephone Number	
Mrs. Mattie Lane		Manager, Toxicology Laboratory		894-3784	
3. Action Requested					
a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate.					
b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated.					
c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void					
4. Dates of Series		5. Records Series Title (followed by title used in office, if different)			
Earliest 12/80	Latest continuing	Alcoholism and Drug Abuse Patient Test Report Files			
6. Division and Office Function What is the function of the Division and the Office in which this record series is created?					
<p>The Division of Mental Health and Mental Retardation administers the programs for mental health, mental retardation, and other developmental disabilities; alcoholism and drug abuse services; and conducts training and research. This Division is also concerned with community mental health, and the administration of the State mental hospitals; and rehabilitation and retardation centers State-wide.</p> <p>The Alcoholism and Drug Abuse Services Section is responsible for providing program guidance and direction to all alcohol and drug abuse programs in the State. These services include the methadone treatment programs; the administration of treatment centers which include counseling, vocational rehabilitation services, and job placement; alcohol and drug abuse research, evaluation, and laboratory testing for determining substance abuse; and contract services to non-governmental drug centers.</p>					
7. Records Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.					
<p>Documents relating to: results of laboratory tests conducted to determine the presence or absence of a variety of abuse drugs such as opiates, alkaloids, barbiturates, amphetamines, and hypnotics in human body fluids of patients who voluntarily participate in programs intended to terminate the use of abusive drugs.</p> <p>Included are: forms - 1250 (Monthly Report Form) - a monthly report of screening for listed abusive substances (methadone, morphine, codeine, hydromorphone, etc.) and showing total numbers screened, confirmed, positive/negative, percent positive, statistics, reruns, and total analytical procedures; 1251 (Diagnostic Examination) shows month and year, substance abuse monthly totals for present/past fiscal years, changes + or -, cumulative totals present/past, changes from previous years, and totals; 1252 (Analysis Report) from treatment centers shows Center number, date completed, analysis as to presence of abuse substances (quinine, demerol, dilaudid, etc.);</p> <p>File is arranged: chronologically by date test report received; thereunder, by patient's name and identification number.</p>					
8. Monthly Reference Rate How often are records referred to which are:					
One to six months old 5 - 10 ; Seven to twelve months old _____ ; Thirteen to twenty-four months old _____ ; twenty-five months and older _____ ?					
9. Annual Rate of Accumulation or Records					
Letter-size drawers approx. 5 ; Legal-size drawers _____ ; Shelves _____ ; Other (Specify) _____					

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
X		b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation. Section 408 contain client names - Federal Register-Vol. 40-No. 127-DHEW Public Health Service
	X	c. Is this a vital record? //(Confidentiality of Alcohol and Drug Abuse Patient Records
	X	d. Does this series have historical or long-term research value?
	X	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
	X	f. Is the information contained in this series ever published? If yes, attach copy.
X		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. attached
X		h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? applicable portions at clinics which treat clients
	X	i. Is this series (or a major portion of it) regularly microfilmed?
	X	j. Does the record series result in a computer printout?

11. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|----------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | 3 _____ years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☐ Fiscal Year; ☒ Other _____ then,

- ☐ Hold in the current files area _____ month(s) _____ year(s); then
- ☐ Transfer to local holding area; hold _____ year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☐ Destroy
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

Cut off file as follows:

Analysis Report

(forms 1250 - 1251 - 1252)

(- 1253 and 1256)

and Annual Summary Reports

Cut off file at end of each calendar
year; hold in current files area 3
months; transfer to State Records
Center; hold 2 years and 9 months;
then destroy.

These instructions apply to all prior and future accumulations of the series.

Test Results

(forms 1254 and 1255)

Beginning July 1, 1982, cut off file;
hold in current files area 2 months;
transfer to State Records Center;
hold 1 year; then destroy.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
Mattie G. Lane	7-8-82	Elizabeth W. Crank	7/8/82
		Elizabeth W. Crank, CRM State Records Committee (Signature)	Date
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)	State Auditor/Designee	Carroll Hart	7-15-82
	Secretary of State/Designee		7-15-82
	Attorney General/Designee		7-15-82